|   | PATEN  | EC  | ORD   | Application or Docket Number                |  |            |                     |                        |            |                               |                        |
|---|--|---|---|---|--|------------|---------------------|------------------------|------------|-------------------------------|------------------------|
| CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)  |  |   |   |   |  |            | SMALL ENT           | 71 <b>TY</b>           | OR         | OTHER<br>SMALL                |                        |
| U.S. NATIONAL STAGE FEES  |  |   | 6   |   |  |            | RATE                | FEE                    |            | RATE                          | FEE                    |
| BASIC FEE   |  |   | SMALL ENT. = 1  | 150 LAF                                     | RGE ENT. = \$ 300                      | 1          | BASIC FEE           |                        | OR         | BASIC FEE                     | 300                    |
| EXAMINATION FEE   |  |   | Satisfies PCT Article (4) = \$50/\$                         | 100   | other situations =<br>\$ 100 / \$ 200  | ]          | EXAM. FEE           |                        |            | EXAM. FEE                     | 200                    |
| SEARCH FEE  |  |   | U.S. is ISA = \$ 50<br>ALL other countri<br>\$ 200 / \$ 400 | es = ALL                                    | ALL other situations = \$ 250 / \$ 500 |            | SEARCH FEE          |                        |            | SEARCH FEE                    | 400                    |
| FEE FOR EXTRA SPEC. PGS.  |  |   | minus 100 =   |   | / 50 =                                 |            | X \$ 125 =          |                        |            | X \$ 250 =                    |                        |
| TOTAL CHARGEABLE CLAIMS   |  |   | ( minus 20 = .  |   |  |            | X \$ 25 =           |                        | OR         | X \$ 50 =                     |                        |
| INDEPENDENT CLAIMS  |  |   | / minus 3 = .   |   |  |            | X \$ 100 =          |                        | OR         | X \$ 200 =                    |                        |
| MULTIPLE DEPENDENT CLAIM PRE  |  |   | ESENT   |   |  |            | + \$ 180 =          |                        | OR         | + \$ 360 =                    |                        |
| If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |   |   |  |            | TOTAL               |                        | OR         | TOTAL                         | 900                    |
| (Column 1) (Column 2) (Column 3)  |  |   |   |   |  |            |                     |                        | OR<br>     | OTHER THAN SMALL ENTITY ADDI- |                        |
| AMENDMENT A   | 1/3/03   | REMAINING<br>AFTER<br>AMENDMENT           |   | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA                       |            | RATE                | TIONAL                 | 7          | RATE                          | TIONAL<br>FEE          |
|   | Total .  | .6  | Minus **  | 20  | =                                      |            | X \$ 25 =           |                        | OR         | X \$ 50 =                     |                        |
|   | Independent                                    | • /                                       | Minus   | • 3   | =/                                     |            | X \$ 100 =          |                        | OR         | X \$ 200 =                    |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   |   |  |            | + \$ 180 =          |                        | OR         | <b>\$ 360 =</b>               | : .                    |
|   |  |   |   |   |  |            | TOTAL ADDIT.        |                        | OR         | TOTAL ADDIT.                  |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |   |   |  |            |                     |                        |            |                               |                        |
| AMENDMENT 8   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                       |            | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total '  | *   | Minus **  |   | =                                      |            | X \$ 25 =           | ï                      | OR         | X \$ 50 =                     |                        |
|   | Independent                                    | •   | Minus ***   | •   | =                                      |            | X \$ 100 =          |                        | OR         | X \$ 200 =                    |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   |   |  | + \$ 180 = |                     | OR                     | + \$ 360 = |                               |                        |
|   |  |   |   |   |  |            | TOTAL ADDIT.<br>FFF |                        | OR         | TOTAL ADDIT.<br>FFF           |                        |
| · · · · · · · · · · · · · · · · · · ·   |  |   |   |   |  |            |                     |                        |            |                               |                        |
| " If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |   |   |  |            |                     |                        |            |                               |                        |

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